APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

DS-DE 9 (Rev. 10/10)

CITY RECEIVED

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CITY : LY WEST KEY WEST, FLORIDA

Rule 1S-2.0001, F.A.C.

officer before opening the campaign account.	OFFICE USE ONLY
1. CHECK APPROPRIATE BOX(ES):	
Initial Filing of Form Re-filing to Change: 🔲 T	reasurer/Deputy 🔲 Depository 🔲 Office 🔲 Party
2. Name of Candidate (in this order: First, Middle, Last)	3. Address (include post office box or street, city, state, zip
Mona C. Clark	code) 809 Elizabeth St,
4. Telephone 5. E-mail address	Key West, FL 33040
(305) 294 6949 mongcarlisa clark@	<u></u>
6. Office sought (include district, circuit, group number)	7. If a candidate for a <u>nonpartisan</u> office, check if applicable:
Utility Board / Group 4	My intent is to run as a Write-In candidate.
8. If a candidate for a <u>partisan</u> office, check block and fill in name of party as applicable: My intent is to run as a	
Write-In No Party Affiliation	Party candidate.
9. I have appointed the following person to act as my Campaign Treasurer Deputy Treasurer	
10. Name of Treasurer or Deputy Treasurer Mona C: Clark	
11. Mailing Address	12. Telephone
same as above	() same
13. City 14. County 15. Sta Key West Monroe F	ate 16. Zip Code 17. E-mail address L 33040 monacarlisaclark@bellsouth
18. I have designated the following bank as my Primary Depository Secondary Depository	
19. Name of Bank 20. Address	
First State Bank of the Fikey	5 Simonton St.
21. City 22. County Monroe	23. State 24. Zip Code 33.0 4.0
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.	
25. Date	26. Signature of Candidate
2/26/11	x //long C. Clark
27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)	
I,, do hereby accept the appointment	
(Please Print or Type Name)	
'esignated above as: Campaign Treasurer Deputy Treasurer.	
2 26 11 X	Mona C. Clark
Date	Signature of Campaign Treasurer or Deputy Treasurer